

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		9-2-00
O.I.P.E. CLASSIFIER		49	9/13/00
FORMALITY REVIEW	BS	804	10/17/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	10/17/00
2	3/8/04
3	✓✓
4	✓✓
5	✓✓
6	✓✓
7	✓✓
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9	✓✓✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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